AMENDMENT TRANSMITTAL LETTER CLIENT-MATTER NO.:
66661-028

SERIAL NO: FILING DATE: EXAMINER: GROUP ART UNIT: 1631
March 30, 2001 M. Zeman CONFIRMATION NO.: 7007

NVENTION: METHODS FOR DETERMINING THE TRUE SIGNAL OF AN ANALYTE

COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450 CERTIFICATE OF MAILING BY "EXPRESS MAIL"
"EXPRESS MAIL" MAILING LABEL NUMBER: EV 400 552 628US
DATE OF DEPOSIT: May 4, 2004

I HEREBY CERTIFY THAT THIS PAPER OR FEE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE "EXPRESS MAIL POST OFFICE TO ADDRESSEE" SERVICE UNDER 37 CFR 1.10 ON THE DATE INDICATED ABOVE AND IS ADDRESSED TO COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VIRGINIA 22313-1450

Printed Name of Person Mailing Paper or Fee
Signature of Person Mailing Paner or Fee

Transmitted herewith is the Response, with Exhibits A and B as attachments thereto, to the Office Action mailed January 29, 2004, in the above-identified application.

- Small Entity status of this application has been established under 37 CFR 1.27.
- Petition for Extension of Time is enclosed (in duplicate).
- No additional claims fee is required.
- An additional claims fee is required and has been calculated as shown below:

## **CLAIMS AS AMENDED**

	NUMBER AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		RATE			FEE			
						MALL NTITY		OTHER ENTITY		SMALL ENTITY	OTHER ENTITY
TOTAL CLAIMS	85	Н	85	х	\$	9.00	\$	18.00	П	\$	\$
INDEPENDENT CLAIMS	7	II	7	х	\$	43.00	\$	86.00	=	\$	\$
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS:YES \$ 145.00 \$ 290.00 \$ NO							S	\$			
					T	OTAL AD	DIT	IONAL FEE		\$ 0.00	\$

- If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.
- \*\* If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.
- \*\*\* If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 0, write "0" in the space.

Inventor(s): I Serial No.:

Ideker et al. 09/823,850

Filed:

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$\boxtimes$	Please charge my Deposit Account No.	502624 the amount of \$55.00 which covers the
	fee for a one -month extension of time.	A duplicate copy of this sheet is enclosed.

- The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No. 502624. A duplicate copy of this sheet is enclosed.
- The Commissioner is hereby authorized to charge to Deposit Account No. 502624 any fees under 37 CFR 1.17 which may be required under 37 CFR 1.136(a)(3) for an extension of time in any concurrent or future reply requiring a petition for extension of time. A duplicate copy of this sheet is enclosed.

Dated: May 4, 2004

Respectfully submitted,

David A. Gay

Registration No. 39,200

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San Diego, California 92122

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